

City of Mountain View Recreation Division presents...

MULTI-MEDIA & ART CLASSES FOR YOUTH!

INTRO TO DIGITAL MEDIA

Discover the world of Digital Media in this sampler class. This class will cover topics such as comic book making, digital art, animation and stop-motion movie making.

Mondays 10/3-11/7 3:30-4:30pm

R\$90/NR\$112.50 Ages 6-8



COMIC BOOKING

Create comic books and be introduced to photo processing techniques and comic making software!

Tuesdays 10/25-11/15 3:30-5:00pm

Wednesdays 10/26-11/16 3:30-5:00pm

R\$145/NR\$181.25

Ages 8-10

MOVIE MAKING FOR KIDS

Create short movies such as self-portraits, movie trailers, and music videos! Discover what it takes to make your own movie!

Tuesdays 10/25-11/15 5:15-6:45pm

Wednesdays 10/26-11/16 5:15-6:45pm

R\$145/NR\$181.25 Ages 11-16



All classes held at the Fun with Media Studios, 1764-A Miramonte Avenue.

Check the Activity Guide for more information on Materials fees and no class dates.

For more information or to Register, call the Recreation Office at (650) 903-6331.

Become our Fan on Facebook! www.facebook.com/mountainviewrecreation

class registration form

parent / legal adult – main contact:

First Name _____ Last Name _____

Address _____ City _____ Zip Code _____

Home Phone (____) _____ Work (____) _____ Cell Phone (____) _____ E-mail _____

Emergency Contact: _____ Relationship _____ Phone ☐ Home ☐ Cell (____) _____
First Last

Customer Service: (650) 903-6331
Fax: (650) 962-1069
E-mail: recreation@mountainview.gov

payment: ☐ **Cash** (please do not mail cash) ☐ **Check** (payable to "City of Mountain View") ☐ **Visa** ☐ **MasterCard**

Credit Card # _____ - _____ - _____ Expiration Date ____ / ____

Name as it appears on Credit Card _____ **Cardholder Signature X** _____

participant name – first and last	birthdate	gender	grade	class #	class name	fee	alternate class #
						\$	
						\$	
						\$	
						\$	
						\$	
						\$	
						\$	
						\$	
Mail / Drop-Off Registrations Only: Separate check required for each class.						Total	\$

List any Allergies, Medication(s), Health Concerns, or Special needs: _____

Participant's Name _____

photo release: By affixing my initials here: _____ I DO NOT agree nor grant the City of Mountain View permissions to use my and/or my child's photograph or likeness, or that of a pet or personal property, for promotional use in any City related media.

waiver & release: In consideration of participation in a class or activity offered by the Recreation Division of the City of Mountain View, I, the below signed, agree to indemnify and hold the City of Mountain View harmless and hereby waive, release and discharge any and all claims for loss or damage, for death, personal injury, bodily injury or property damage which I may have or which hereinafter may accrue to me against the City of Mountain View, its City Council, employees, agents, and volunteers for any liability arising out of or connected in any way with my participation in this class or activity, even though that liability may arise out of negligence or carelessness on the part of the person or entities mentioned above. I understand that accidents and injuries can arise from participation in this class or activity; knowing the risks, nevertheless, I hereby agree to assume those risks on behalf of myself, my heirs and assigns and to release and to hold harmless all of the persons or entities mentioned above who (through negligence or carelessness) might otherwise be liable to me (or my heirs or assigns) for damages. Further, I understand that the City of Mountain View, its City Council, employees, agents and volunteers, are not responsible for the personal property of the participants in the class or activity. It is further understood and agreed that this waiver, release and assumption of risks has been freely entered into and is to be binding on me and on my heirs and assigns. I have read and agree to the registration and program policies. By my signature below, I acknowledge that I have read this document and understand its contents.

Signature: x _____ Date _____ ☐ **Parent** ☐ **Legal Guardian** ☐ **Participant** **City Employee #/Dept.:** _____